

Application Data Sheet

APPLICATION INFORMATION

Application Number::

Filing Date:: December 8, 2003

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks:

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: A VENTILATION UNIT FOR A MOTOR VEHICLE

Attorney Docket Number:: 225159

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 5

Small Entity?: No

Latin Name::

Variety denomination name::

Petition Included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Greg
Middle Name::
Family Name:: Rademacher
Name Suffix::
City of Residence:: Clarkston
State or Prov. of Residence:: Michigan
Country of Residence:: US
Street of mailing address:: 8820 Bridge Lake Road
City of mailing address:: Clarkston
State or Province of mailing address:: Michigan
Country of mailing address:: US
Postal or Zip Code of mailing address:: 48348

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Don
Middle Name::
Family Name:: Masterson
Name Suffix::
City of Residence:: Auburn Hills
State or Prov. of Residence:: Michigan
Country of Residence:: US
Street of mailing address:: 201 N. Squirrel Road
#1531
City of mailing address:: Auburn Hills
State or Province of mailing address:: Michigan
Country of mailing address:: US
Postal or Zip Code of mailing address::

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 23460
Phone:: (312) 616-5600
Fax:: (312) 616-5700
E-mail Address:: mail@leydig.com

REPRESENTATIVE INFORMATION

Representative Customer Number:: 23460

Representative Designation:: Registration Number:: Representative Name::

DOMESTIC PRIORITY INFORMATION

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

FOREIGN APPLICATION INFORMATION

Country::

Application Number:: Filing Date::

Priority Claimed

ASSIGNEE INFORMATION

Assignee name:: Behr GmbH & Co.

Street of mailing address:: Maserstrabe 3

City of mailing address:: Stuttgart

State or Province of
mailing address::

Country of mailing
address:: Bermany

Postal or Zip Code of
mailing address:: D-70469